

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | M.P. | | 2-15-01 |
| O.I.P.E. CLASSIFIER | | 59 | 3211 |
| FORMALITY REVIEW | LS | 857 | 4/6/01 |
| RESPONSE FORMALITY REVIEW | LS | 50906 | 08/21/01 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 ÷ Restricted O Objected

| Claim | Date |
|----------------|---------|
| Final Original | |
| 1 | 2/10/01 |
| 2 | 2/23/01 |
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| Claim | Date |
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| Claim | Date |
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| Final Original | |
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If more than 150 claims or 10 actions
 staple additional sheet here